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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Jennifer First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Dotson Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8746	

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Debtor 1 **Jennifer Dotson**

Document

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1824 S. Clarence, Apt. 1	If Debtor 2 lives at a different address:
		Rumber, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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⊃ar	Tell the Court About	Your B	Bankruptcy Ca	ise		
7.	The chapter of the Bankruptcy Code you are				ach, see <i>Notice Required by</i> e 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.
	choosing to file under	■ C	hapter 7			
		□с	hapter 11			
		□с	hapter 12			
			hapter 13			
3.	How you will pay the fee		about how yo	u may pay. Typically attorney is submittin	, if you are paying the fee y	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with
				the fee in installm e in Installments (Of		ion, sign and attach the Application for Individuals to Pay
			but is not requapplies to you	uired to, waive your ur family size and yo	fee, and may do so only if you are unable to pay the fee i	on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out
			the Application	on to Have the Chap	ter 7 Filing Fee Waived (Offi	icial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the last 8 years?	■ No				
	not o youro.	<u> </u>	District		When	Case number
			District		When	Case number
			District		When	Case number
0.	Are any bankruptcy cases pending or being	■ No	0			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District	-	When	Case number, if known
11.	Do you rent your	■ No	Go to li	ine 12.		
	residence?	— .v.		ur landlord obtained	an eviction judgment again	st you and do you want to stay in your residence?
			J.S.	No. Go to line 12.	, 5	
				Yes. Fill out <i>Initial</i> S bankruptcy petition.		Judgment Against You (Form 101A) and file it with this

Debtor 1 Jennifer Do	on Document	Page 4 of 62	Case number (if known)	8/16/17 2:11PM
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14.	Are you a sole proprietor	=	0 - 1	Dart 4			
	of any full- or part-time business?	No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ess		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	& ZIP Code		
	it to this petition.		Chec	k the appropriate box	to describe your business:		
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	No.	I alli I	not filing under Chapte	я 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		I, but I am NOT a small business debtor according to the definition in the Bankruptcy	/	
		☐ Yes.	I am i	iling under Chapter 11	I and I am a small business debtor according to the definition in the Bankruptcy Cod	e.	
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
	Do you own or have any	■ No.					
14.	property that poses or is						
14.	alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?			
14.		⊔ Yes.	If immed	the hazard? diate attention is why is it needed?			

Debtor 1 Jennifer Dotson

Document Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?			nsumer debts? Consumer debts are definonal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ov	we that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,000			
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	1 00 05	0.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities	■ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	to be?	□ \$100,001 - \$500,000		□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion			
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	37: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
				did not pay or agree to pay someone who is not an attorney to help me fill out this ad the notice required by 11 U.S.C. § 342(b).				
		I request i	relief in accordance with the cl	hapter of title 11, United States Code, spec	cified in this petition.			
		bankrupto and 3571.	y case can result in fines up to	concealing property, or obtaining money o o \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Jennifer	fer Dotson Dotson	Signature of Debtor	72			
			of Debtor 1	3				
		Executed	on August 16, 2017 MM / DD / YYYY	Executed on MM	/ DD / YYYY			

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Case number (if known) Debtor 1 **Jennifer Dotson**

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	August 16, 2017	
Signature of Attorney for Debtor		MM / DD / YYYY	
David M. Siegel Printed name			
David M. Siegel & Associates Firm name			
790 Chaddick Drive Wheeling, IL 60090			
Number, Street, City, State & ZIP Code			
Contact phone (847) 520-8100	Email address		
#06207611			
Bar number & State			

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Page 8 of 62 Document Fill in this information to identify your case: Jennifer Dotson First Name Middle Name Last Name

Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106Sum

Debtor 1

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,402.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	20,402.00
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,961.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,091.00
	Your total liabilities	\$	34,052.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,729.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,729.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Debtor 1 Jennifer Dotson

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

8/16/17 2:11PM

Case 17-24524 Doc 1 Filed 08/16/17 Entered 08/16/17 14:20:52 Desc Main Document Page 10 of 62 Fill in this information to identify your case and this filing: Debtor 1 Jennifer Dotson Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Journey Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2015 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$13,750.00 \$13,750.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,750.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Jennifer Dotson			Case number (if known)	
Yes.	. Describe				
	Househ	old Goods & Furniture			\$300.00
□ No	oles: Televisions and radios; a including cell phones, ca	audio, video, stereo, and digita ameras, media players, games		printers, scanners; music o	collections; electronic devices
	IV & Ele	ectronics			
Examp ■ No	ibles of value les: Antiques and figurines; p other collections, memor	paintings, prints, or other artwo rabilia, collectibles	ork; books, pictures, or oth	ner art objects; stamp, coin	, or baseball card collections;
Examp ■ No	nent for sports and hobbies bles: Sports, photographic, ex musical instruments Describe	s tercise, and other hobby equip	ment; bicycles, pool table	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No		s, ammunition, and related equi	ipment		
□ No		leather coats, designer wear,	shoes, accessories		
	Normal	Clothes			\$300.00
■ No □ Yes. 13. Non-fa	ry ples: Everyday jewelry, costu Describe arm animals ples: Dogs, cats, birds, horse	ume jewelry, engagement rings	s, wedding rings, heirloon	n jewelry, watches, gems, ç	gold, silver
■ No	. Describe	75			
■ No	ther personal and househo	old items you did not already	list, including any heal	th aids you did not list	
		our entries from Part 3, includere		es you have attached	\$1,050.00
	escribe Your Financial Assets				
Do you o	wn or have any legal or equ	uitable interest in any of the	following?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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Case number (if known) Document Debtor 1 Jennifer Dotson 16 Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking/Savings **Chase Bank** \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401(k) \$5,000.00 **ERISA Qualified** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Jennifer Dotson 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement □ No Yes. Give specific information..... Child Support (month) \$602.00 **Child Support** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Term Life Insurance** \$0.00 **Death Benefit Only** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

page 4

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Case number (if known)

Document

36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here	ges you have attached	\$5,602.00	
Part	5: Describe Any Business-Related Property You Own or Have an Interes	st In. List any real esta	ate in Part 1.	
87. C	o you own or have any legal or equitable interest in any business-related	I property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You O If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
l6.	Do you own or have any legal or equitable interest in any farm- o	r commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You D	Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$13,750.00		
57.	Part 3: Total personal and household items, line 15	\$1,050.00		
58.	Part 4: Total financial assets, line 36	\$5,602.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$20,402.00	Copy personal property total	\$20,402.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$20,402.00

Debtor 1

Jennifer Dotson

Document Page 15 of 62 Fill in this information to identify your case: Debtor 1 Jennifer Dotson First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$13,750.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$450.00		\$450.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$300.00	•	\$300.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$0.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$13,750.00 \$300.00 \$300.00	\$300.00 \$0.0	Copy the value from Schedule A/B \$13,750.00 \$2,400.00 100% of fair market value, up to any applicable statutory limit \$450.00 \$300.00 \$450.00 \$300.00 100% of fair market value, up to any applicable statutory limit \$300.00 \$450.00 \$300.00 \$300.00 100% of fair market value, up to any applicable statutory limit \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$0.00 \$0.00 \$0.00

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Case number (if known)

S	Frief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	01(k): ERISA Qualified ine from Schedule A/B: 21.1	\$5,000.00		\$5,000.00	735 ILCS 5/12-1006	
L	ine nom Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit		
	Child Support: Child Support (month)	\$602.00		\$602.00	735 ILCS 5/12-1001(g)(4)	
L	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit		
	erm Life Insurance Death Benefit Only	\$0.00		\$0.00	215 ILCS 5/238	
	ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		

Yes

Case	17-24524		ied 08/16/1 <i>1</i> Document	Page 1	ea 08/16/17 14:2 7 of 62	20:52 Desc	C Main 8/16/17 2:11PM
Fill in this informatio	n to identify yo						
Debtor 1 J o	ennifer Dotso	n					
	rst Name	Middle N	ame	Last Name			
Debtor 2							
(Spouse if, filing) Fire	rst Name	Middle N	ame	Last Name			
United States Bankrup	otcy Court for the	: NORTHERN	DISTRICT OF IL	LINOIS			
Case number							
(if known)			_			☐ Ch	eck if this is an
						am	nended filing
Official Form 10	neD						
Official Form 10		- \A/I	01-1	C	al lass Duana and	_	
schedule D:	Creditors	s wno Ha	<u>re Claims</u>	Secure	d by Property	<u>/</u>	12/15
					qually responsible for su On the top of any additior		
umber (if known).	ilionai Fage, illi il	out, number the e	nines, and allacin it	i to tilis lorili. C	in the top of any addition	iai pages, write you	name and case
. Do any creditors have	claims secured b	y your property?					
☐ No. Check this	box and submit	this form to the co	ourt with your othe	r schedules. Y	ou have nothing else to	report on this for	m.
Yes. Fill in all o	of the information	below.					
Part 1: List All Sec	cured Claims						
2. List all secured claim		more than one sec	ured claim, list the cr	editor separatel	Column A	Column B	Column C
for each claim. If more th	nan one creditor ha	s a particular claim,	list the other creditor	rs in Part 2. As	Amount of claim	Value of collatera	
much as possible, list the	ciaims in aipnabei	tical order according	, to the creditor's nan	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Chrysler Capi	tal	Describe the pr	operty that secures	the claim:	\$14,961.00	\$13,750.0	\$1,211.00
Creditor's Name		2015 Dodge	Journey				
Po Box 96127	5	As of the date y apply.	ou file, the claim is:	Check all that			
Fort Worth, T	X 76161	Contingent					
Number, Street, City,	State & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who owes the debt?	Check one.	Nature of lien.	Check all that apply.				
Debtor 1 only			t you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)					
Debtor 1 and Debtor 2	2 only	☐ Statutory lien	(such as tax lien, me	echanic's lien)			
At least one of the del	btors and another	☐ Judgment lie	n from a lawsuit				
Check if this claim re community debt	elates to a	Other (includ	ing a right to offset)	Purchase	Money Security		
	Opened 04/15 Last						
	Active						
Date debt was incurred		Last 4 di	gits of account num	nber 1000			
	-						
			101.14			4 00	

Add the dollar value of your entries in Column A on this page. Write that number here: \$14,961.00 If this is the last page of your form, add the dollar value totals from all pages. \$14,961.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	Ca	ase 17-24524	Doc 1	Filed 08/16/17 Document	7 Entered 08/16/17 14:20:52 <u>Page 18 of 62</u>	2 Desc Ma	8/16/17 2:11PM
Filli	n this infor	mation to identify you	ır case:	12(1):111			
Deb	tor 1	Jennifer Dotso	า				
		First Name		dle Name	Last Name		
	tor 2	First Name	Mida	do Nomo	Loot Nome		
	ise if, filing)			dle Name	Last Name		
Unit	ed States Ba	inkruptcy Court for the	: NORTHI	ERN DISTRICT OF IL	LLINOIS		
Cas	e number						
(if kno	own)					☐ Check if t	his is an
						amended	filing
∩ffi	cial Forn	n 106E/F					
		/F: Creditors	Who Hay	ve Unsecured	l Claims		12/15
					TY claims and Part 2 for creditors with NONPRI	IORITY claims. List t	
Sche eft. A	dule D: Credit attach the Cor and case nu	tors Who Have Claims S	ecured by Propage. If you ha	operty. If more space is eve no information to re	Do not include any creditors with partially secundenced, copy the Part you need, fill it out, nune port in a Part, do not file that Part. On the top of	nber the entries in th	ne boxes on the
1. I		ors have priority unsecu					
ı	No. Go to F	Part 2.					
ı	☐ Yes.						
Part	2: List A	II of Your NONPRIOR	RITY Unsecu	red Claims			
3. I	Do any credit	ors have nonpriority un	secured claim	s against you?			
ı	☐ No. You ha	ve nothing to report in thi	s part. Submit	this form to the court with	n your other schedules.		
ı	Yes.						
t	unsecured clai	m, list the creditor separa	tely for each cl	aim. For each claim liste	he creditor who holds each claim. If a creditor h d, identify what type of claim it is. Do not list claims have more than three nonpriority unsecured claim	s already included in F	Part 1. If more
						Total c	laim
4.1	AFNI			Last 4 digits of ac	count number		\$140.00
	Nonpriorit PO Box	y Creditor's Name		When was the deb			
		ngton, IL 61702		when was the dec			
		Street City State Zlp Code		As of the date you	file, the claim is: Check all that apply		
	Who incu	rred the debt? Check or	ne.				
	Debto	r 1 only		☐ Contingent			
	☐ Debto	r 2 only		☐ Unliquidated			
	☐ Debto	r 1 and Debtor 2 only		☐ Disputed			
		st one of the debtors and		<u></u> '	RITY unsecured claim:		
		t if this claim is for a co	mmunity	☐ Student loans			
	debt Is the cla	im subject to offset?		☐ Obligations arisi report as priority cla	ing out of a separation agreement or divorce that y aims	ou did not	
	■ No	-			n or profit-sharing plans, and other similar debts		
	☐ Yes			Other. Specify			
				= Cirici. Opcory			

Document

Page 19 of 62 Case number (if know) Debtor 1 Jennifer Dotson

4.2	Assurex Health	Last 4 digits of account number	9107	\$330.00
	Nonpriority Creditor's Name	- M/L and come the stable in account of 0		
	Dept CH 16854 Palatine, IL 60055-6854	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane and other cimiles debte	
	■ No	·	ig plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	Barclays Bank Delaware	Last 4 digits of account number	7323	\$3,140.00
	Nonpriority Creditor's Name		Opened 04/15 Last Active	
	P.o. Box 8803	When was the debt incurred?	4/22/16	
	Wilmington, DE 19899 Number Street City State Zlp Code	- As of the data you file, the claim	in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	із. Спеск ан шасарріу	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections	3	
4.4	Cap One	Last 4 digits of account number	4661	\$1,833.00
	Nonpriority Creditor's Name	_	-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Bankruptcy Dept.	When we she debt in some 10	Opened 02/15 Last Active	
	PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	5/06/16	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections		
	— 163	Other. Specify	-	

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4.5 \$681.00 Cap One Last 4 digits of account number 4624 Nonpriority Creditor's Name Bankruptcy Dept. When was the debt incurred? **Opened 01/17** PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.6 **Capital One** Last 4 digits of account number 5844 \$977.00 Nonpriority Creditor's Name Opened 10/15 Last Active 15000 Capital One Dr When was the debt incurred? 5/06/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other, Specify 4.7 **Capital One** Last 4 digits of account number 0650 \$875.00 Nonpriority Creditor's Name Opened 09/11 Last Active 15000 Capital One Dr When was the debt incurred? 5/20/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes

Debtor 1 Jennifer Dotson

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4.8	Capital One	Last 4 digits of account number	5892	\$495.00
	Nonpriority Creditor's Name 15000 Capital One Dr	When was the debt incurred?	Opened 02/17	
	Richmond, VA 23238 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	Yes	· · ·		
	□ Yes	Other. Specify Collections)	
4.9	CB/Lane Bryant Nonpriority Creditor's Name	Last 4 digits of account number	8536	\$207.00
	PO Box 337001 NorthGlenn, CO 80233-7001	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.1	Chana Card		6420	¢742.00
0	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	6130	\$713.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/16 Last Active 9/23/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin		
		· ·	•	
	Yes	Other. Specify Collections	•	

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Debto	Jennifer Dotson	Case number (if know)			
4.1	Comcast	Last 4 digits of account number	\$140.00		
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ140.00		
	PO Box 3002 Southeastern, PA 19398-3002	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other Specify Services			
4.1	Cradit One	Last 4 digits of account number 9344	¢2.064.00		
2	Credit One Nonpriority Creditor's Name	Last 4 digits of account number 9344	\$2,061.00		
	Bankrupcty Department PO Box 98873	When was the debt incurred? Opened 12/16			
	Las Vegas, NV 89193	_			
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	□ Debtor 1 only □ Contingent □				
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt	_			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collections			
4.1	ICS Collection Service. Inc.	Last 4 digits of account number	\$200.00		
3	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ200.00		
	P.O. Box 1010 Tinley Park, IL 60477	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	□ Debtor 2 only □ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	, _			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	■ Other Specify Collections			
		- Other, Specify			

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4.1 Kohl/Cap1 2790 \$1,049.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/13 Last Active PO Box 6497 When was the debt incurred? 5/06/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.1 Loyola Univ Physician 8847 \$82.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/16 Last Active PO Box 88049 When was the debt incurred? 6/10/17 Chicago, IL 60680-1049 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections 4 1 **Loyola University Medical Center** 8848 \$304.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 3266 When was the debt incurred? **Opened 11/16** Milwaukee, WI 53201-3266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes

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Loyola University Medical Center	Last 4 digits of account number	8845	\$125.0
Nonpriority Creditor's Name PO Box 3266	When was the debt incurred?	Opened 11/16	
Milwaukee, WI 53201-3266 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0. 11.0 uuto you 11.0, 11.0 o.u.	C. C	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	og plans, and other similar debts	
■ No □ Yes			
⊔ Yes	Other. Specify Collections	<u> </u>	
Loyola University Medical Center	Last 4 digits of account number	8846	\$50.0
Nonpriority Creditor's Name PO Box 3266	When was the debt incurred?	Opened 11/16	
Milwaukee, WI 53201-3266	when was the dept incurred?	Opened 11/10	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify Collections		
Loyola University Medical Center	Local Addition of account mountain	4872	\$5.0
Nonpriority Creditor's Name	Last 4 digits of account number		φυ.υ
PO Box 3266		Opened 09/15 Last Active	
Milwaukee, WI 53201-3266	When was the debt incurred?	11/09/15	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Collections		

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Case number (if know)

Debtor	1 Jennifer Dotson	——————————————————————————————————————	Case number (if know)	
4.2 0	SyMed, Inc.	Last 4 digits of account number	3560	\$117.00
	Nonpriority Creditor's Name 2502 N. Clark Street Suite 210	When was the debt incurred?	Opened 11/14	
	Chicago, IL 60614			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections		
4.2	SYNCB/AMAZON PLCC	Last 4 digits of account number	0432	\$1,496.00
	Nonpriority Creditor's Name PO Box 965015 Orlando, FL 32896-5015	When was the debt incurred?	Opened 01/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Purchases		
4.2	SYNCB/Old Navy Nonpriority Creditor's Name	Last 4 digits of account number		\$355.00
	PO Box 965005 Orlando, FL 32896-5005	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Purchases		

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4.2	Syncb/QVC	Last 4 digits of account number		\$360.00	
	Nonpriority Creditor's Name 1200 Wilson Drive West Chester, PA 19380	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alaim.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d Claim:		
	☐ Check if this claim is for a community				
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts		
	Yes	Other. Specify Purchases			
4.2	SYNCB/SAM'S CLUB DC	Last 4 digits of account number	2513	\$0.00	
	Nonpriority Creditor's Name	_			
	PO Box 965036 Orlando, FL 32896-5036	When was the debt incurred?	Opened 08/00 Last Active 9/20/05		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify NOTICE ON	NLY		
4.2	SYNCB/WALMART	Last 4 digits of account number	4989	\$1,735.00	
	Nonpriority Creditor's Name PO Box 965024 Orlando, FL 32896-5024	When was the debt incurred?	Opened 09/14 Last Active 5/06/16		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,	,		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	ommunity			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes	Other. Specify Collections	<u> </u>		

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4.2 6	Target NB	Last 4 digits of account number	5973	\$806.00			
	Nonpriority Creditor's Name CCS Gray OPS Center	_	Opened 02/14 Lest Active				
	PO Box 6497	When was the debt incurred?	Opened 03/14 Last Active 6/09/16				
	Sioux Falls, SD 57117	_					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	■ Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed	I alaim.				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:				
	☐ Check if this claim is for a community debt		and the second and the second				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Purchases					
4.2	TUD/CDNA (Home Denet)		0242	\$0.00			
7	THD/CBNA (Home Depot) Nonpriority Creditor's Name	Last 4 digits of account number	9213	\$0.00			
	,		Opened 4/21/06 Last Active				
6	PO Box 6497 Sioux Falls, SD 57117-6497	When was the debt incurred?	10/28/07				
	Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts				
	Yes	Other. Specify NOTICE ON					
	Washington Mutual	Last 4 digits of account number		\$815.00			
	Nonpriority Creditor's Name	_					
	16 McLeland Road Saint Cloud, MN 56303	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Collections					
	• •						

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-24524 Doc 1 Filed 08/16/17 Entered 08/16/17 14:20:52 Desc Main Page 28 of 62 Case number (if know) Document Debtor 1 Jennifer Dotson Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Alpha Recovery Corp. Line $\underline{\textbf{4.8}}$ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5660 Greenwood Plaza Blvd., Ste Part 2: Creditors with Nonpriority Unsecured Claims Greenwood Village, CO 80111 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt and Gaines. P.C. Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankrupty Department** ■ Part 2: Creditors with Nonpriority Unsecured Claims 661 N. Glenn Ave. Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital 1 Bank Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital 1 Bank Line 4.5 of (Check one): Attn: General Correspondence Po Box 30285

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank Usa Line 4.5 of (Check one): 15000 Capital One Dr Richmond, VA 23238

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Salt Lake City, UT 84130

Capital One Bank Usa

15000 Capital One Dr

Richmond, VA 23238

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address **Cavalry Portfolio Serv** Po Box 27288 Tempe, AZ 85285

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.21 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address Client Services, Inc. 3451 Harry Truman Blvd Saint Charles, MO 63301-4047 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.25 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Comcast **Bankruptcy Department** 11621 E. Marginal Way 5 Tukwila, WA 98168-1965

Name and Address

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 Jennifer Dotson

On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Comenity Bank/LNBRYANT Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182789 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2789 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **First National Collection Bureau** Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Dept 21377** Part 2: Creditors with Nonpriority Unsecured Claims **PO Box 1259** Oaks, PA 19456 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **GECRB/Amazon** Line **4.21** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 981439 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-1439 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Gecrb/Amazon Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 103104 Roswell, GA 30076 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GECRB/AMAzon** Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 960013 Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32896 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GECRB/Amazon PLCC** Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 965015 Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32896-5015 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GECRB/SAMD** Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 981416 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address GECRB/SAMD Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 965005 ■ Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32896-5005 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GECRB/SAMS** Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 981400 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Home Depot Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Department** Part 2: Creditors with Nonpriority Unsecured Claims PO Box 20483 Kansas City, MO 64195 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Home Depot Credit Services** Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182676 Part 2: Creditors with Nonpriority Unsecured Claims

Columbus, OH 43218-2676

Last 4 digits of account number

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Case number (if know)

Debtor 1 Jennifer Dotson Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Kohl/Capital One Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 3115 ■ Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53201-3115 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? LVNV Funding Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 10587 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, SC 29603 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Merchants & Medical Credit Corp. Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6324 Taylor Dr. ■ Part 2: Creditors with Nonpriority Unsecured Claims Flint, MI 48507 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 30 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Monarch Recovery Management, Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 10965 Decatur Road Philadelphia, PA 19154-3210 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address MRS Associates of New Jersey ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.10 of (Check one): 1930 Olney Ave Part 2: Creditors with Nonpriority Unsecured Claims Cherry Hill, NJ 08003 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Nationwide Credit & Co Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 815 Commerce Dr Ste 270 Part 2: Creditors with Nonpriority Unsecured Claims Oak Brook, IL 60523 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **NCB Mangement Services Inc.** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1 Allied Drive Part 2: Creditors with Nonpriority Unsecured Claims Feasterville Trevose, PA 19053-6945 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Northland Group** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Department** ■ Part 2: Creditors with Nonpriority Unsecured Claims 7831 Glenroy Road, Suite 350 Edina, MN 55439 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Rsh & Associates Llc** Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 14515 Part 2: Creditors with Nonpriority Unsecured Claims Lenexa, KS 66285 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Stoneleigh Recovery Associates, Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims LLC Part 2: Creditors with Nonpriority Unsecured Claims PO Box 1479 Lombard, IL 60148-8479 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

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Jenniter Dotson		Case number (# know)
SYNCB/Sams PO Box 965005 Orlando, FL 32896-5005	Line 4.24 of (<i>Check one</i>): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Target NB Attn:Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440	On which entry in Part 1 or Part Line 4.26 of (Check one): Last 4 digits of account number	2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address The Bureaus Inc 1717 Central St Evanston, IL 60201	On which entry in Part 1 or Part Line 4.5 of (Check one): Last 4 digits of account number	2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address WFNNB/Lane Bryant Bankruptcy Department PO Box 182789 Columbus, OH 43218	On which entry in Part 1 or Part Line 4.9 of (Check one): Last 4 digits of account number	2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address WFNNB/Lane Bryant Bankruptcy Department PO Box 182789 Columbus, OH 43218	On which entry in Part 1 or Part Line 4.9 of (Check one): Last 4 digits of account number	2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,091.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	19,091.00

Page 32 of 62 Document Fill in this information to identify your case: Debtor 1 Jennifer Dotson First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Cheyeme Peyton
1824 S Clarence Ave
Berwyn, IL 60420

State what the contract or lease is for
Month to Month

	Case 17-24524 L	Docume		08/10/17 14.20.52 of 62	DESC IVIAITI 8/16/17 2:11PM
Fill in this	information to identify your	case:			
Debtor 1	Jennifer Dotson				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	NORTHERN DISTRICT			
0	h				
Case num (if known)					☐ Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Cod	ohtore			42/45
JUITEL	iule II. Toul Cou	EDIOIS			12/15
our name	and number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question			any Additional Pages, write
■ No					
■ No					
2 18/14	hin the last 8 years, have you	lived in a community pr	anarty atata ar tarritas	n/2 (Community proporty ata	too and tarritarian include
	na, California, Idaho, Louisiana,				les and territories include
■ No	. Go to line 3.				
	s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
			•		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the cr	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The credito	r to whom you owe the debt
	Name, Number, Street, City, State and Zl	P Code		Check all schedules that	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street City	State	ZIP Code	_	
22				Cohodula D. Ka	
3.2	Name			_ ☐ Schedule D, line _ ☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

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	in this information to identify your o									
Del	otor 1 Jennifer Do	tson								
	otor 2 Juse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
_	se number 	-	Check if this is: An amended filing A supplement showing postpetition chapte 13 income as of the following date:							
0	fficial Form 106l					MM / I	DD/ YY	/YY		
S	chedule I: Your Inc	ome							12	2/1
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili ur spouse is not filing w	ng jointly, and your s ith you, do not includ	pouse e infor	is liv mati	ring with you, on about you	, inclu ır spol	de informa use. If mor	ation about your e space is neede	d,
1.	Fill in your employment information.		Debtor 1			Del	otor 2	or non-fili	ng spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed				☐ Employed			
		Employment status	☐ Not employed			☐ Not employed				
		Occupation	Dynamic Schedu	ıler						
	Include part-time, seasonal, or self-employed work.	Employer's name	Loyola Hospital 2160 S. 1st Ave Maywood, IL 60153							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? <u>05/2013</u>				_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	port for	any	line, write \$0 i	n the s	space. Inclu	ude your non-filing	
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all e	empl	oyers for that	persor	on the line	es below. If you ne	ed
						For Debtor	1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,077	.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0	.00	+\$	N/A	

3,077.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Debtor 1 Jennifer Dotson Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 3.077.00 N/A List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 378.00 N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 N/A 5c. Voluntary contributions for retirement plans 5c. \$ N/A 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 N/A Insurance 42.00 5e. 5e. N/A 5f. **Domestic support obligations** 5f. 0.00 N/A 5q. **Union dues** 5g. \$ 0.00 N/A 5h. Other deductions. Specify: DIVF% EE 5h.+ \$ 154.00 \$ N/A \$ DNTHIEE 42.00 \$ N/A **HITROEE** \$ \$ 127.00 N/A **LTDBUEE** 12.00 N/A Park EE 22.00 N/A **DIVF\$EE** 161.00 N/A **ESUPPEE** 8.00 N/A \$ N/A **EAD&DEE** 2.00 \$ **CLIFEEE** 2.00 N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 6. 950.00 N/A Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 2,127.00 N/A 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 N/A 8b. Interest and dividends 8b. 0.00 N/A Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 602.00 N/A 8d. **Unemployment compensation** 8d. 0.00 N/A **Social Security** 8e. 8e. 0.00 N/A Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A Other monthly income. Specify: 8h. 8h.+ \$ \$ 0.00 N/A Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 602.00 \$ N/A \$ 10. Calculate monthly income. Add line 7 + line 9. 10. 2.729.00 + \$ N/A \$ 2.729.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 12. 2,729.00 applies Combined

monthly income

Debtor 1 Jennifer Dotson

Case number (if known)

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

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Deb	n this information to identify your case: Jennifer Dotson		Ch	eck if this is: An amended filing	•
	tor 2				owing postpetition chapter of the following date:
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	OIS		MM / DD / YYYY	
l	e numbernown)				
O1	ficial Form 106J				
So	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are small or space is needed, attach another sheet to this family has been as the small of the small				
Par 1.	Describe Your Household Is this a joint case?				
١.	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of De	ebtor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		12	■ Yes
		Danaktan		40	□ No
		Daughter		13	Yes
					□ No □ Yes
					_ ☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				- ''
Par					
exp	mate your expenses as of your bankruptcy filing date unless y enses as of a date after the bankruptcy is filed. If this is a supp licable date.				
the	ude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I: Y</i> icial Form 106I.)			Your ex	penses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	950.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	· -	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	· -	0.00
	4d. Homeowner's association or condominium dues		4d.	\$	0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Deb	tor 1	Jennifer	Dotson	Case num	ber (if known)	
6.	Utiliti	ies:				
0.	6a.		heat, natural gas	6a.	\$	250.00
	6b.	•	wer, garbage collection	6b.		0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Spe		6d.	· · · · · · · · · · · · · · · · · · ·	0.00
7.	Food		ekeeping supplies	7.	\$	601.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	ning, laundi	ry, and dry cleaning	9.	\$	100.00
10.		•	products and services	10.	\$	100.00
		-	ntal expenses	11.	\$	0.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	200.00
13.	Enter	rtainment, o	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Chari	itable conti	ributions and religious donations	14.	\$	0.00
15.		rance.				
			surance deducted from your pay or included in lines 4 or 20		•	
		Life insura		15a.		0.00
		Health insu		15b.	·	0.00
		Vehicle ins		15c.	· -	0.00
4.0			Irance. Specify:	15d.	\$	0.00
16.	Speci		clude taxes deducted from your pay or included in lines 4 o	r 20. 16.	\$	0.00
17.			ease payments:			
			ents for Vehicle 1	17a.	· ·	328.00
			ents for Vehicle 2	17b.		0.00
		Other. Spe	•	17c.	·	0.00
		Other. Spe	·	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not your pay on line 5, Schedule I, Your Income (Official Fo		\$	0.00
19.			s you make to support others who do not live with you.	1001).	\$	0.00
	Speci		, , , , , , , , , , , , , , , , , , , ,	19.	· -	<u> </u>
20.	•	·	erty expenses not included in lines 4 or 5 of this form o	r on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estate	e taxes	20b.	\$	0.00
	20c.	Property, h	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenan	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calcı	ulate vour r	monthly expenses			
~~.		-	through 21.		\$	2,729.00
			2 (monthly expenses for Debtor 2), if any, from Official Forn	106.I-2	\$	2,729.00
				1 1000 2	\$	2 720 00
	220. /	Auu IIIIe 22a	a and 22b. The result is your monthly expenses.		Φ	2,729.00
23.	Calcu	ulate your r	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.		2,729.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	2,729.00
	23c.		our monthly expenses from your monthly income.	220	¢	0.00
		The result	is your monthly net income.	23c.	\$	0.00
24.			an increase or decrease in your expenses within the year			
			ou expect to finish paying for your car loan within the year or do you terms of your mortgage?	expect your mortgage	payment to incre	ase or decrease because of a
	■ No	0.				
	□Y€	es.	Explain here:			

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Fill in this info	ormation to identify your c	ase:			
Debtor 1	Jennifer Dotson				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nosse	Loot Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 106Dec				
			al Dalatarila Ca		
Declara	ation About a	n inaiviauz	al Deptor's So	cnedules	12/15
	. 18 U.S.C. §§ 152, 1341, 15 ign Below	19, and 3571.			
ا Did you	pay or agree to pay some	one who is NOT an at	torney to help you fill out	bankruptcy forms?	
■ No					
	Name of parago			Attach Pank	ruptcy Petition Preparer's Notice,
☐ Yes.	Name of person				and Signature (Official Form 119)
				,	,
	nalty of perjury, I declare t are true and correct.	hat I have read the su	ımmary and schedules file	ed with this declaration	n and
X /s/.la	ennifer Dotson		X		
	ifer Dotson		Signature o	f Debtor 2	
	ture of Debtor 1		- J	-	
Date	August 16, 2017		Date		

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Fill in	this inform	nation to identify you	r case:			
Debto	r 1	Jennifer Dotson				
Debto	r 2	First Name	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Case (if know	number					Check if this is an mended filing
Stat Be as inform	complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part 1	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. W	/hat is your	current marital statu	ıs?			
	Married					
	Not marr	ried				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	tall of the places you li	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
Part 2		ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
4. D Fi	id you have	e any income from en I amount of income yo		all businesses, including part-		ndar years?
	- 110	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,276.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-24524 Doc 1 Filed 08/16/17 Entered 08/16/17 14:20:52 Desc Main Page 41 of 62 Document ase number (if known) Debtor 1 Jennifer Dotson Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$35,357.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$33,555.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

Part 3:	List Certain	Payments	You Made	Before '	You Filed f	or Bankruptcy

, .	AI C	Citilei	Debicit 13 of Debicit 23 debis primarily consumer debis:
		No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an
			individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Amount you Was this payment for ... Dates of payment **Total amount** still owe paid

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Debtor 1 Jennifer Dotson

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Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.			al partner; corporations gent, including one for		
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost		ments or transfer a	any property or	n account of a d	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Par	rt 4: Identify Legal Actions, Repossession	e and Foroclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	, divorces, collectio		y actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		rty repossessed, f	oreclosed, gar		d, seized, or levied? Value of the
	Creditor Name and Address	Describe the Property		Da	ite	property
		Explain what happened				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fii	nancial institut	ion, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		te action was	Amount
	taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ■ No □ Yes					
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than \$	6600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			tes you gave e gifts	Value
	Person to Whom You Gave the Gift and Address:					

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Page 43 of 62 Case number (if known) Document Debtor 1 Jennifer Dotson 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Date of your Describe any insurance coverage for the loss Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Amount of Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You David M. Siegel & Associates 6/29/17 -\$500.00 **Attorney Fees** 790 Chaddick Drive 8/4/17 Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.

Address

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

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ase number (*if known*)

Debtor 1 Jennifer Dotson

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Describe the contents Name of Storage Facility Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Describe the property **Owner's Name** Where is the property? Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jennifer Dotson

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execut	tive of a corporation					
	☐ An owner of at least 5% of the voting or	equity securities of a corporation					
	■ No. None of the above applies. Go to Part	12.					
	Yes. Check all that apply above and fill in the	he details below for each business					
	Address	escribe the nature of the business	Employer Identification number Do not include Social Security				
	(Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Dates business existed				
	Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	ıde all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	te Issued					

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Page 46 of 62 Case number (if known) Debtor 1 Jennifer Dotson Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jennifer Dotson Signature of Debtor 2 Jennifer Dotson

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Signature of Debtor 1

Date August 16, 2017

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	ation to identify your Jennifer Dotson			
Debior 1	First Name	Middle Name	Last Name	-
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
	cruptcy Court for the:		TRICT OF ILLINOIS	
Officed States Daris	dupley Court for the.	NORTHERN BIO	THE ST ILLINGIS	-
Case number (if known)				☐ Check if this is an amended filing
Official For		n for Indiv	riduals Filing Under Cha	ptor 7
Statement	or intentio	ii ioi iiidiv	riduals Filling Officer Cha	pter / 12/15
If you are an indivi	dual filing under cha	pter 7, you must fil	l out this form if:	
creditors have o	claims secured by yo	ur property, or		
You must file this t	er is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the da e time for cause. You must also send copies	
	ple are filing togethe date the form.	r in a joint case, bo	th are equally responsible for supplying corr	ect information. Both debtors must
	d accurate as possib Ir name and case nui		s needed, attach a separate sheet to this form	n. On the top of any additional pages,
Part 1: List You	r Creditors Who Hav	e Secured Claims		
1. For any creditor	s that you listed in P	art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	pperty (Official Form 106D), fill in the
information belo	ow. itor and the property t	hat is collateral	What do you intend to do with the property secures a debt?	y that Did you claim the property as exempt on Schedule C?
Creditor's Ch iname:	rysler Capital		☐ Surrender the property.☐ Retain the property and redeem it.	□ No
Description of	2015 Dodge Journ	ev	Retain the property and enter into a	Yes
property securing debt:	J	•	Reaffirmation Agreement. □ Retain the property and [explain]:	
For any unexpired in the information	below. Do not list rea	ase that you listed al estate leases. Un	in Schedule G: Executory Contracts and Une expired leases are leases that are still in effe the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your une	expired personal pro	perty leases		Will the lease be assumed?
Lessor's name:	Cheyeme Pey	ton		□ No
				■ Yes
Description of lease Property:	ed Month to Mon	th		
Part 3: Sign Bel	low			
arcillo. Sign Bel	IOW			

Official Form 108

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Deb	otor 1 Jennifer Dotson	Case number (if known)
	der penalty of perjury, I declare that I have indicated my indicated m	intention about any property of my estate that secures a debt and any personal
	Jennifer Dotson	Signature of Debtor 2
	Signature of Debtor 1	
	Date August 16, 2017	Date

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-24524 Doc 1 Filed 08/16/17 Entered 08/16/17 14:20:52 Desc Main Document Page 53 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

	In a War Date			Troi their District of Innio			
In re	Jennifer Dots	on		Debtor(s)	Case I Chapt		7
							<u> </u>
	DIS	SCL	OSURE OF COM	IPENSATION OF ATTO	RNEY FOR	DI	EBTOR(S)
co	ompensation paid	o me	within one year before th	. 2016(b), I certify that I am the attor the filing of the petition in bankruptcy lation of or in connection with the ba	y, or agreed to be j	paid	to me, for services rendered or t
	For legal service	ces, I	have agreed to accept		\$		1,450.00
				eived			500.00
	Balance Due				\$		950.00
2. T	he source of the co	mper	nsation paid to me was:				
	Debtor		Other (specify):				
3. T	he source of comp	ensati	ion to be paid to me is:				
	Debtor		Other (specify):				
. I	I have not agree	d to s	share the above-disclosed	compensation with any other person	n unless they are n	nem	bers and associates of my law fir
				mpensation with a person or persons the names of the people sharing in th			
5. Iı	n return for the abo	ove-di	isclosed fee, I have agree	ed to render legal service for all aspec	cts of the bankrupt	tcy c	case, including:
b. c.	 Preparation and Representation of [Other provision Negotiati agreement 	filing of the is as n ons v	g of any petition, schedule debtor at the meeting of oneeded] with secured creditor	I rendering advice to the debtor in de es, statement of affairs and plan whic creditors and confirmation hearing, a es to reduce to market value; ex eeded; preparation and filing of cods.	ch may be required and any adjourned cemption plann	i; hea ing ;	urings thereof;
б. В	Represer	ntatio		sed fee does not include the following dischargeability actions, judiceeding.		anc	es (except in Chapter 13
				CERTIFICATION			
	certify that the for inkruptcy proceedi		g is a complete statement	t of any agreement or arrangement for	or payment to me	for r	epresentation of the debtor(s) in
Au	ıgust 16, 2017			/s/ David M. Sieg	gel		
Da	_			David M. Siegel			
				Signature of Attorn David M. Siegel 790 Chaddick D Wheeling, IL 600	& Associates rive		

(847) 520-8100 Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

H.

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ \M\subseteq \O

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

opportunity to ask questions regarding	this agreement, is satisfied with it, and accepts it in its entirety.
Date: 6 29 7	Signed And Dolor
	Print: (KNNKER DOTSON)
Date:	Signed:
	m .
	Print:
	^ ~
Date: 6/29//7	Signed:
	Attorney for David M. Siegel

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United States Bankruptcy CourtNorthern District of Illinois

		Tot them District of Innions		
In re	Jennifer Dotson		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	57
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	ors is true and correct	to the best of my
Date:	August 16, 2017	/s/ Jennifer Dotson Jennifer Dotson		

AFNI PO Box 3667 Bloomington, IL 61702

Alpha Recovery Corp. 5660 Greenwood Plaza Blvd., Ste 101 Greenwood Village, CO 80111

Assurex Health
Dept CH 16854
Palatine, IL 60055-6854

Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Blitt and Gaines, P.C. Bankrupty Department 661 N. Glenn Ave. Wheeling, IL 60090

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One 15000 Capital One Dr Richmond, VA 23238

Capital One Bank Usa 15000 Capital One Dr Richmond, VA 23238

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285

CB/Lane Bryant PO Box 337001 NorthGlenn, CO 80233-7001

Chase Card Po Box 15298 Wilmington, DE 19850

Chrysler Capital Po Box 961275 Fort Worth, TX 76161

Client Services, Inc. 3451 Harry Truman Blvd Saint Charles, MO 63301-4047

Comcast PO Box 3002 Southeastern, PA 19398-3002

Comcast Bankruptcy Department 11621 E. Marginal Way 5 Tukwila, WA 98168-1965

Comenity Bank/LNBRYANT PO Box 182789 Columbus, OH 43218-2789

Credit One Bankrupcty Department PO Box 98873 Las Vegas, NV 89193

First National Collection Bureau Dept 21377 PO Box 1259 Oaks, PA 19456

GECRB/Amazon PO Box 981439 El Paso, TX 79998-1439

GECRB/AMAzon PO Box 960013 Orlando, FL 32896

Gecrb/Amazon Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

GECRB/Amazon PLCC PO Box 965015 Orlando, FL 32896-5015

GECRB/SAMD PO Box 981416 El Paso, TX 79998

GECRB/SAMD PO Box 965005 Orlando, FL 32896-5005

GECRB/SAMS
PO Box 981400
El Paso, TX 79998

Home Depot Bankruptcy Department PO Box 20483 Kansas City, MO 64195

Home Depot Credit Services PO Box 182676 Columbus, OH 43218-2676

ICS Collection Service, Inc. P.O. Box 1010
Tinley Park, IL 60477

Kohl/Cap1
PO Box 6497
Sioux Falls, SD 57117

Kohl/Capital One PO Box 3115 Milwaukee, WI 53201-3115

Loyola Univ Physician PO Box 88049 Chicago, IL 60680-1049

Loyola University Medical Center PO Box 3266 Milwaukee, WI 53201-3266

LVNV Funding PO Box 10587 Greenville, SC 29603

Merchants & Medical Credit Corp. 6324 Taylor Dr. Flint, MI 48507

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Monarch Recovery Management, Inc. 10965 Decatur Road Philadelphia, PA 19154-3210

MRS Associates of New Jersey 1930 Olney Ave Cherry Hill, NJ 08003

Nationwide Credit & Co 815 Commerce Dr Ste 270 Oak Brook, IL 60523

NCB Mangement Services Inc. 1 Allied Drive Feasterville Trevose, PA 19053-6945

Northland Group Bankruptcy Department 7831 Glenroy Road, Suite 350 Edina, MN 55439 Rsh & Associates Llc Po Box 14515 Lenexa, KS 66285

Stoneleigh Recovery Associates, LLC PO Box 1479 Lombard, IL 60148-8479

SyMed, Inc. 2502 N. Clark Street Suite 210 Chicago, IL 60614

SYNCB/AMAZON PLCC PO Box 965015 Orlando, FL 32896-5015

SYNCB/Old Navy PO Box 965005 Orlando, FL 32896-5005

Syncb/QVC 1200 Wilson Drive West Chester, PA 19380

SYNCB/SAM'S CLUB DC PO Box 965036 Orlando, FL 32896-5036

SYNCB/Sams PO Box 965005 Orlando, FL 32896-5005

SYNCB/WALMART PO Box 965024 Orlando, FL 32896-5024

Target NB CCS Gray OPS Center PO Box 6497 Sioux Falls, SD 57117 Target NB Attn:Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

THD/CBNA (Home Depot) PO Box 6497 Sioux Falls, SD 57117-6497

The Bureaus Inc 1717 Central St Evanston, IL 60201

Washington Mutual 16 McLeland Road Saint Cloud, MN 56303

WFNNB/Lane Bryant Bankruptcy Department PO Box 182789 Columbus, OH 43218